

SUBMIT: COMPLETE APPLICATION, TAX STATEMENT AND FEES TO:  
 Bayfield County  
 Planning and Zoning Depart.  
 PO Box 58  
 Washburn, WI 54891  
 (715) 373-6138

APPLICATION FOR PERMIT  
 BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)  
**OCT 09 2020**  
 Bayfield Co. Zoning Dept.

Permit #:	21-0002
Date:	1-5-21
Amount Paid:	\$567 1-5-21 \$100 1-5-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
 Checks are made payable to: Bayfield County Zoning Department.  
**DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.**

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input checked="" type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: R. Douglas O'Leary Trust		Mailing Address: 5103 Arden Ave. Edina, MN 55424		City/State/Zip: Edina, MN 55424		Telephone: (612) 805-9031 Cell Phone:		
Address of Property: 45905 Kraft's Pt. Rd.		City/State/Zip: Cable, WI 54821						
Contractor: Scott Byrd (715) 492-4184		Contractor Phone: 492-4184		Plumber:		Plumber Phone:		
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Mike Fortak (715)		Agent Phone: 817-2034		Agent Mailing Address (include City/State/Zip): 6173 Iron Lk Rd, WI 54847		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
PROJECT LOCATION	Legal Description: (Use Tax Statement)		Tax ID# (4-5 digits)		Recorded Deed (i.e. # assigned by Register of Deeds)		Document #	
1/4, 1/4	Gov't Lot 1+2		Lot(s) 1		CSM		Vol & Page	
Section 4, Township 43 N, Range 7 W		Town of: Cable		Lot(s) No. 10+		Block(s) No. 700		Subdivision: Goff's Resubdivision
				Lot Size		Acreage 9.9		

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? <b>If yes---continue →</b>	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <b>If yes---continue →</b>	Distance Structure is from Shoreline : 90' feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$189,000	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>Conduit</u>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement			<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
<input type="checkbox"/> _____	<input type="checkbox"/> _____			<input type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length:	Width:	Height:

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	( X )	
	<input checked="" type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( X )	
	with Loft	( X )	
	with a Porch	( X )	
	with (2 <sup>nd</sup> ) Porch	( X )	
	with a Deck	( X )	
<input type="checkbox"/> Commercial Use	with (2 <sup>nd</sup> ) Deck	( X )	
	with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/> Mobile Home (manufactured date)	( X )	
	<input checked="" type="checkbox"/> Addition/Alteration (specify) <u>Deck &amp; Screen Porch</u>	( 12 X 14 )	168
	<input type="checkbox"/> Accessory Building (specify) <u>on small cabin deck</u>	( 24 X 16 )	384
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	( X )	
	<input type="checkbox"/> Special Use: (explain) _____	( X )	
<input checked="" type="checkbox"/> Conditional Use: (explain) <u>3 unit MOD</u>	( X )		
<input type="checkbox"/> Other: (explain) _____	( X )		

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): \_\_\_\_\_  
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date \_\_\_\_\_

Authorized Agent: Mike Fortak  
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

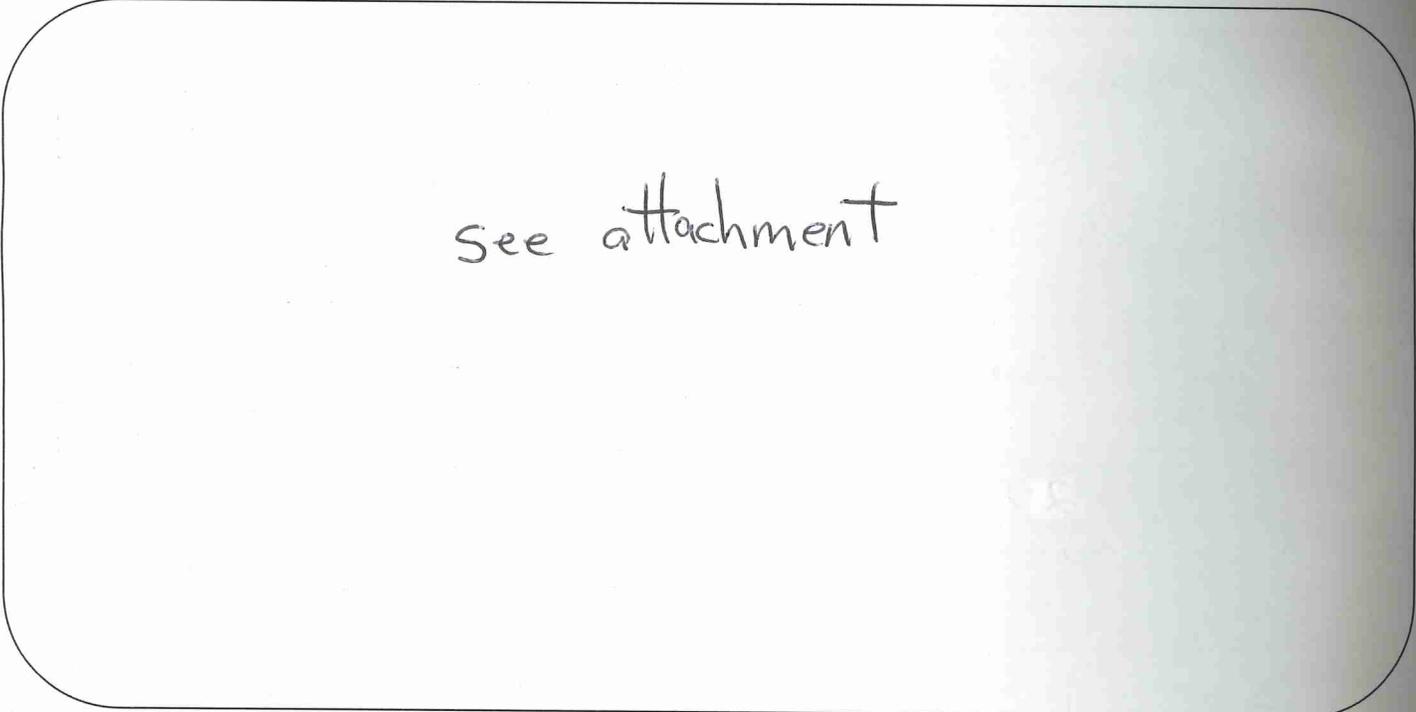
Date 10-7-2020

Address to send permit 19720 Pioneer Rd., Cable, WI 54821

Attach  
 Copy of Tax Statement   
 If you recently purchased the property send your Recorded Deed

Box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (\*): **(\* Driveway and (\* Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(\* Well (W); (\* Septic Tank (ST); (\* Drain Field (DF); (\* Holding Tank (HT) and/or (\* Privy (P)**
- (6) Show any (\*): **(\* Lake; (\* River; (\* Stream/Creek; or (\* Pond**
- (7) Show any (\*): **(\* Wetlands; or (\* Slopes over 20%**



see attachment

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
<i>Kraft's Pt Ad</i>			
Setback from the Centerline of Platted Road	270+ Feet	Setback from the Lake (ordinary high-water mark)	90 Feet
Setback from the Established Right-of-Way	240+ Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	50 Feet		
Setback from the South Lot Line	300+ Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line <i>Lake</i>	NA Feet	20% Slope Area on property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	240+ Feet	Elevation of Floodplain	Feet
<i>Pump Tank</i>			
Setback to Septic Tank or Holding Tank	9' Feet	Setback to Well	50 Feet
Setback to Drain Field	140' Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: <i>15-1389</i>	# of bedrooms: <i>8</i>	Sanitary Date: <i>10-20-15</i>
Permit Denied (Date):		Reason for Denial:		
Permit #: <i>21-0000</i>		Permit Date: <i>1-5-21</i>		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes <i>CUP-2020A-586177</i> <i>MUD-3 units</i>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:		Zoning District <i>(RRB)</i> Lakes Classification <i>( 1 )</i>		
Date of Inspection: <i>10-9-20</i>	Inspected by: <i>AP</i>	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.) <i>ABide by conditions of CUP-2020A-586177</i> <i>Build as proposed</i> <i>Get required UDC Inspections</i>				
Signature of Inspector: <i>Maclean</i>			Date of Approval: <i>1/4/21</i>	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



State or Federal  
Required

38S

(ZC Mtg: 12/17/2020)

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

Issued To: **R. Douglas OLeary / Mike Furtak, Agent**

-	1/4	Section 4	Township 43	N.	Range 7	W.	Town of Cable
Lot 10	Block	Subdivision	Goff's Resub of GL 2		CSM#		

Development: [ (3) existing units for private resort/family compound. Structure #1 is a 1-Bedroom (30' x 25') with proposed addition (30' x 25') (includes 1/2 deck-1/2 screen porch); Structure #2 is a 3-4' x 43' with steps (West), fireplace (South), bay windows (North) & (South); and Structure #3 is a 1-1/2' x 10" with steps to the (West) & (East) ]

Expansions or development would require additional permitting.

human habitable structures 2]No short-term rental. Additional Conditions placed by (Planning and Zoning and use application(s) and fee(s) shall be required for any new residence, any building or structure erected, rebuilt or structurally altered. 4]Land use permit(s) shall be obtained prior to the initiation of construction or a and use 5]Local Town, Village, City, State or Federal agencies may also require permits.

one year from date of issuance if the authorized construction not begun.

Specifications shall not be made without obtaining approval. Void or revoked if any of the application information is found presented, erroneous, or incomplete.

Void or revoked if any performance conditions are not prohibitory conditions are violated.

**Tracy Pooler**

Authorized Issuing Official

**January 5, 2021**

Date